



Office use only

Agenda Date: _____

**BOARD OF LICENSE COMMISSIONERS
1305 HANCOCK STREET, QUINCY, MA. 02169**

PHONE- 617-376-1134 FAX-617-376-1139

Business Name:_____ **Phone:**_____

BusinessAddress:_____

Applicants Name:_____

Phone:_____

Home Address:_____

Type of License: _____

Proposed Hours:_____

Proposed # of Vehicles (Motor I & II Applicants)_____

APPLICATION FEE \$100.00 payable to the City of Quincy

SIGNATURE OF APPLICANT:_____

APPLICANTS MUST DO THE FOLLOWING BEFORE A HEARING DATE IS SCHEDULED

1. Meet with their Ward Councillor
2. Complete the Departmental Inspection sign-off sheet
3. Food Plan Review & sign-off from Health Department (all common Victualer).
4. Down Town Applicants must meet with Quincy Center Business & Professional Association.
(617-471-3232)
5. All Gas applicants must notify abutters 7 days prior to hearing date.
6. When completed return original application to License Board.
7. Upon Approval of License applicants must file a Business Certificate in City Clerks Office.



CITY OF QUINCY BOARD OF LICENSE COMMISSIONERS

617-376-1134

PUBLIC HEARING REQUEST FORM

NAME OF PROPOSED BUSINESS
TYPE OF LICENSE
LOCATION
PICTURE
BUILDING OWNERS SIGNATURE
LICENSE APPLICANT
TELEPHONE #

INSPECTIONAL SERVICES DEPARTMENT

55 SEA STREET QUINCY MA 02169

617-376-1455

ITEM	APPLICABLE		SUBMITTED ?
	YES	NO	
ZONING ISSUES			
BUILDING PERMIT-NEEDED			
SIGN PERMIT-NEEDED			

OUTSTANDING PERMITS IN ANY DEPT?

ASSESSORS-TAX TITLE? (Attach Assessor's printout)

FIRE DEPARTMENT INSPECTION REQUIRED?

Recommendations

REVIEWED BY:

DATE:

SCHEDULE LICENSE BOARD HEARING?

YES

NO

HEALTH DEPARTMENT 1585 HANCOCK ST. LOWER LEVEL-617-376127

PROPOSED MENU?

FLOOR PLAN?

- **SHOW EQUIPMENT IN FOOD PREPARATION AREA**
- **SHOW STORAGE AREAS**
- **SHOW CLEANING AND SANITATION EQUIPMENT**
- **SHOW FINISH COVERINGS ON WALLS, FLOORS AND CEILINGS**
- **SHOW DUMPSTER LOCATION**

REVIEWED BY:

DATE:

SCHEDULE LICENSE BOARD HEARING?

YES

NO



OFFICE USE ONLY

Agenda date_____

Name_____

Address_____

Name of requesting agency:_____

Name and title of individual making request for records:

The name under which the request for records is being made

Purpose for which the information is being requested

Identification of person about whom request is being made:

Full name

Address

Date of birth

Social Security #

Telephone #

I hereby swear or affirm under the penalties of perjury that all statements and representations made on this record request form are true and complete to the best of my knowledge, that I am authorized to make this record request and that this record request is otherwise in accord with the above named agency's certificate for access to criminal offender record information.

Signature:_____



QUINCY POLICE DEPARTMENT
1 SEA STREET
QUINCY MA 02169
617-479-1212



PAUL KEENAN
POLICE CHIEF

EMERGENCY BUSINESS CONTACT FORM

To help serve the business community better, the Quincy Police Department is updating all emergency business contact information. The information you provide will enable the Police to contact you or a representative of your business should a problem occur. This information is strictly confidential and will be stored in the database of the Police computer system. We would appreciate your completing this form as accurately as possible, and returning it to the above address. Thank You.

IT IS VERY IMPORTANT THAT YOU NOTIFY THE QUINCY POLICE COMMUNICATIONS DIVISION WHENEVER ANY OF THIS INFORMATION CHANGES.

DATE: _____

COMPANY NAME: _____

TELEPHONE # _____ FAX# _____

ADDRESS: _____

Order of persons to be contacted:

Name:	Address:	Telephone #
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1. _____

2. _____

3. _____

use back of form for additional information

After Business hours does your business have:

Alarms: _____ Lights: _____ Guard: _____ Guard Dog: _____

Does your business contain any material or condition that could be hazardous to police or fire department personnel who may have to enter after business hours? If so please explain: _____

Use additional sheets if necessary.

License Type

Restaurant/Wine & Malt	Call for availability & Fee
Club-All Alcoholic	Call for availability & Fee
Club-Wine & Malt	Call for availability & Fee
Veteran's Post/All Alcoholic	Call for availability & Fee
General On Premise-Alcohol (no CV)	Call for availability & Fee
Retail store All Alcoholic	Call for availability & Fee
Retail Wine & Malt	Call for availability & Fee
Inn Holder	Call for availability & Fee
Auctioneer	\$25.00
Bowling Lanes	\$40.00
Common Victualer	\$100.00
Dancing School	\$50.00
Explosives (Sale & Storage)	\$50.00
Garage/Repair	\$25.00 set by State Regulations
Gas/Repair	\$50.00 set by State Regulations
Hackney-Call for availability	\$75.00 per medallion
Junk Wagon	\$100.00
Juke Box	\$25.00 each
Manager (all gasoline)	\$25.00
Motor I (new cars)	\$50.00
Motor II (used cars)	\$150.00
Lodging House	\$250.00
Movie Theatre	\$50.00 per screen
Old Gold & Silver	\$75.00
Parking Space	\$25.00
Pawn Broker	\$100.00
Pinball/Video (under 4 machines)	\$150.00 each machine
Pool Table	\$125.00 each table

Entertainment Licenses

Cabaret License:	D.J., Karaoke, Piano or 4 or less pieces-	\$150.00
Entertainment	5 or more pieces	\$225.00
Dancing (alcohol-Sunday)		\$100.00-\$150.00
Floor show/Theater Clubs:	(must hold an entertainment license to apply)	\$200.00
Raffle & Bazaar Permits: \$10.00 per year.		
All groups (Churches, Clubs, etc.) who have a State Beano License issued by the Massachusetts State Lottery shall be issued a 1 year Raffle ;and Bazaar permit.		

Ad Books: \$100.00

All solicitors for ad books must submit a request on letterhead and appear before the License Board and state their purpose. Police Chief will research background of each group.

All 1-day permits: i.e. Walks/Runs—Fundraisers-Canning
Profit or Non Profit
Alcohol or Beer & Wine

Contact: Cindy Manning, Secretary
617-376-1134
e-mail cmanning@ci.quincy.ma.us

CITY OF QUINCY
1305 HANCOCK STREET
QUINCY, MA. 02169

PLEASE NOTE THE FOLLOWING:

**IN ACCORDANCE WITH PROVISIONS OF MASSACHUSETTS GENERAL
LAW 138 CHAPTER 62C, § 49A, NO LICENSE OR PERMIT WILL BE
ISSUED TO ANY INDIVIDUAL OR BUSINESS OPERATING IN THE CITY
UNLESS SAID APPLICANT HAS CERTIFIED IN WRITING, UNDER THE
PAINS AND PENALTIES OF PERJURY THAT THE APPLICANT HAS
COMPLIED WITH ALL LAWS OF THE COMMONWEALTH OF
MASSACHUSETTS RELATING TO TAXES INCLUDING LOCAL TAXES,
REAL PROPERTY AND PERSONAL PROPERTY, UNDER THE PROVISIONS
OF CHAPTER 59, FAILURE TO PROPERLY EXECUTE SUCH CERTIFICATE
SHALL BE CONSIDERED GROUNDS TO REVOKE SUCH LICENSE OR
PERMIT.**

CERTIFICATE OF COMPLIANCE:

I, _____

DOING BUSINESS AS: _____

LOCATION: _____

**I CERTIFY THAT ALL STATE AND LOCAL TAXES HAVE BEEN PAID TO
DATE:**

SIGNATURE

CONFIRMED: _____

TREASURER/COLLECTOR